

COMBINED DECLARATION AND POWER OF ATTORNEY

ATTORNEY DOCKET NO. 2670

As a below-named inventor, I hereby declare that:

(Check one) X is attached hereto.

John K. JUNKERS

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention A METHOD OF TIGHTENING AND LOOSENING AN OBJECT the specification of which:

·	_was filed on	as		
	Application Serial No	and		•
W	vas amended on(if a	pplicable)		
· v	vas amended through(if	applicable)		•
I hereby state that I have including the claims, as	e reviewed and understan amended by any amendm	d the contents of the above identinent referred to above.	fied specific	cation,
I acknowledge the duty in accordance with Title	to disclose all information 37, Code of Federal Regu	which is material to the patentabiulations, Section 1.56.	lity of this a	pplication
application(s) for patent	or inventor's certificate lis	35, United States Code, Section sted below and have also identifieng a filing date before that of the a	d below any	/ toreign
Prior Foreign Applicatio	n(s):	Priority Claimed		
Priority Number	Country	Date filed (Priority Date)	Yes	_X_ No
Priority Number	Country	Date filed (Priority Date)	Yes	No
I hereby claim the bene	fit under Title 35, United S	States Code, Section 120 of any L	Inited State	S

I hereby claim the benefit under Title 35, United States Code, Section 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, Section 112, I acknowledge the duty to disclose material information as defined in Title 35, Code of Federal Regulations, Section 1.56(a), which occurred between the filling date of the prior application and the national or PCT International filling date of this application:

(Application Serial No.)	(Filing Date)	(Status - Patented, pending, abandoned)	
(Application Serial No.)	(Filing Date)	(Status - Patented, pending, abandoned)	
(Application Serial No.)	(Filing Date)	(Status - Patented, pending, abandoned)	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that those statements were made with the knowledge that wilful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such wilful false statements may jeopardize the validity of the application or any patent issued thereon.

The undersigned hereby authorizes **Michael J. Striker** and the firm of **Striker**, **Striker & Stenby**, to accept and follow instructions from:

HYTORC

as to any action to be taken in the Patent and Trademark Office regarding this application without direct communication between Michael J. Striker, the firm of Striker, Striker & Stenby, and the undersigned. In the event of a change in the persons from whom instructions may be taken, Michael J. Striker and the firm of Striker, Striker & Stenby will be so notified by the undersigned.

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

POWER OF ATTORNEY:

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Full Name of First or Sole Inventor: John K. JUNKERS	Citizenship: AMERICAN		
Signature:	Date:	Residence and Full Postal Address:	
Full Name of Second Inventor:	Citizenship:		
Signature:	Date:	Residence and Full Postal Address:	
Full Name of Third Inventor:	Citizenship:		
Signature:	Date:	Residence and Full Postal Address:	
Full Name of Fourth Inventor:	Citizenship:		
Signature:	Date:	Residence and Full Postal Address:	
Full Name of Fifth Inventor:	Citizenship:		
Signature:	Date:	Residence and Full Postal Address:	
Full Name of Sixth Inventor:	Citizenship:		
Signature:	Date:	Residence and Full Postal Address:	
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